	PATEN	T APPLIC		FEE DETE Se sor Form P1	-	N RECORD		80	1691,2	tumber 78
	APP		AS FILE	D-PARTI	olumn 2)	SMALL	ENTITY	OR T		R THAN ENTITY
	FOR	NUMBE	RFILED	NUMB	ER EXTRA	RATE (\$)	FEE (S)	]	RATE (S)	FEE (3)
	SIC FEE . CFR 1.16(a), (b), or (c))				·		395	]		790
	ARCH FEE CFR 1.18(1), (i), or (m))							l	İ	
	AMINATION FEE CFR 1.16(0), (p), or (q))							]		
	TAL CLABMS CFR 1.16(1))	53	minus 2	4		x 375 -		OR	x: 50 =	
NO	EPENDENT CLAIMS	<del></del>	minus 3		•	× /00 -	T. —		x 800) =	
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	* If the difference in column 1 is less than zero, enter *0" in column 2.					TOTAL			TOTAL	74000
.3	APPLICA	Cotumn I)	MEND	(Column 2)	(Column 3)	SMAUL	ENTITY	O.R.		R THAN ENTITY
ALV	· A	CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADOH TIONAL FEE (S)		RATE (S)	ADDI- TIONAL FEE (S)
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Ä	GY CFR 1 16/HI	3	Linnus	3	-	x.100 =		C# 1	200.	<u> </u>
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DM: HT	Child Control of the	(37 CFR 1.16			<u> </u>	77-4				
12	Finds Charles Held Hidependent	<del>~~`</del>	i(s)) .	of CLAM (SEE)	r wal	180		(r	360	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Unduring pathening, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments of the tribution of the province to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.